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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number (Optional)
017887-003100US



In re Application of David Simon

Application Number 09/407,666

Filed September 28, 1999

For PERSONAL COMMUNICATION DEVICE WITH BAR CODE
READER FOR OBTAINING PRODUCT INFORMATION
☐ FROM MULTIPLE DATABASES

Group Art Unit
2876

Examiner
Mark Stephen Tremblay

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- ☐ One month (37 CFR 1.17(a)(1)) \$
☐ Two months (37 CFR 1.17(a)(2)) \$
☒ Three months (37 CFR 1.17(a)(3)) \$920
☐ Four months (37 CFR 1.17(a)(4)) \$
☐ Five months (37 CFR 1.17(a)(5)) \$

- ☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$.
☐ A check in the amount of the fee is enclosed.
☐ Payment by credit card. Form PTO-2038 is attached.
☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.
☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 20-1430.
I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor.

- ☐ assignee of record of the entire interest. See 37 CFR 3.71

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

- ☐ attorney or agent of record.
☒ attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a). 41,797 .

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

09/30/02

Date

Gerald T. Gray

Signature

Gerald T. Gray, Reg. No. 41,797

Typed or printed name

10/07/2002 AOSMAN 00000066 201430 09407666

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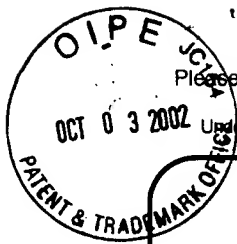
920.00 CH

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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2876

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/407,666	
	Filing Date	September 28, 1999	
	First Named Inventor	David Simon	
	Group Art Unit	2876	
	Examiner Name	Mark Stephen Tremblay	
Total Number of Pages in This Submission	14	Attorney Docket Number	017887-003100US

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement(+ previously filed papers) <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard 14 References
Remarks		The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm and Individual name	Townsend and Townsend and Crew LLP Gerald T. Gray Reg. No. 41,797	
Signature		
Date	09/30/02	

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		09/30/02
Typed or printed name	Jennifer K. Hardin	
Signature		Date 09/30/02